

Please provide the information listed below for every department or agency using radio communications in your county and return this form to:

**Office of Homeland Security, Attn: Martha Freeman, P. O. Box 958, Jackson, MS 39205
Fax: 601/346-1521**

Agency Name: _____

Department Head: _____

Address: _____

City, State, Zip: _____

County: _____ **E-mail:** _____

Office Phone: _____ **Fax:** _____

Department Head Cell Phone (Emergency Contact): _____

COMMUNICATIONS SYSTEM:

What type of communications system is used by this department?

RADIOS:

High Band _____ **Low Band** _____ **800 Trunking** _____

Agency Operating Frequency: _____

Radio frequencies connected to ACU-1000: (If you do not have this information, please provide us with the name and number of the radio service center who maintains this information for your department.) _____

CELLULAR SERVICE, SATELLITE PHONES OR OTHER ASSETS

List: _____

Please provide additional information that might be relevant to the development of the statewide interoperability communication system: _____
